

KDADS STANDARD POLICY

Policy Name: Psychiatric Residential Treatment Facility TPL Cost | Policy Number: TBD

Avoidance Reserve Days

Commission: Behavioral Health Services **Date Established:** 11/15/2016

Applicability: Behavioral Health Services Children's Inpatient **Date Last Revised:** N/A

Program

Contact: Linda Blasi Date Effective: 03/01/2017

Policy Location: Date Posted: TBD

Status/Date: DRAFT September 27, 2016 Number of Pages: 3

Revision History

Purpose

The purpose of this policy is to establish a procedure code modifier that allows Managed Care Organizations (MCOs) to track and monitor the number of Psychiatric Residential Treatment Facility (PRTF) reserve days a resident takes in a calendar year.

Summary

PRTFs are currently bill utilizing the HCFA 1500 form when billing code T2048. Third party liability (TPL) coverage is often denied when submitting code T2048 on the HFCA 1500 form. By submitting claims to TPL insurers on the required billing form, (e.g. UB-04 form with the appropriate revenue codes), third party insurances are more likely to pay for the stay in lieu of Medicaid. The other issue with the PRTFs billing with the HCFA 1500 form is that there is no way to identify when a resident is absent from a PRTF. By billing with a procedure code modifier the PRTF would be required to bill using the UC modifier that identifies when a resident is absent from a facility.

Entities/Individuals Impacted

Psychiatric Residential Treatment Facilities

Florence Crittenton Services, Inc. KVC Prairie Ridge

KVC Wheatland

Kids TLC, Inc.

Lakemary Center, Inc.

M '11 C (Cl. 1)

Marillac Center for Children

Pathways Family Services, Inc.

Pairie View, Inc.

St. Francis Academy

Managed Care Organizations (MCO):

Amerigroup Kansas Sunflower Health Plan United HealthCare **Policy Name: Policy Number: TBD** Psychiatric Residential Treatment Facility TPL Cost Avoidance and Reserve Days **Commission: Date Established: Behavioral Health Services** 11/15/2016 **Applicability:** Behavioral Health Services Children's Inpatient Program Date Last Revised: N/A **Contact: Date Effective:** 03/01/2017 **Policy Location: Date Posted: TBD**

Number of Pages:

3

I. Policy

Status/Date:

Effective with dates of service provided on or after 3/1/17, Psychiatric Residential Treatment Facilities (PRTF) shall use us the procedure code modifier when billing Medicaid and reserve days. The procedure code modifier to be utilized is UC

All references to absentee or visitation days in the "PRTF Regulation, Service Standard, and Policy Manual" or other policies, procedures, or manuals shall be replaced with "reserve days". PRTFs will be reimbursed for reserve days at 60% of the facility specific per diem rate. .

Payment for reserve days for a resident shall not exceed 10 days per 365 day period without approval by the assigned Managed Care Organization (MCO).

Payment for reserve days shall be approved for days in which it is necessary to reserve a bed in a PRTF when the resident is absent for any of the following reasons:

- Medical appointments
- Hospital admission for a medical condition
- Home visits
- Court appointments
- Supervised visitation
- Other approved visitations indicated in the resident's plan of care
- Personal business (i.e. funeral, wedding, graduation, etc.)
- Resident leaves the facility without permission (i.e. AWOL)

DRAFT September 27, 2016

II. Procedures

- A. The resident's plan of care shall provide supporting documentation indicating frequency, duration and location of each reserve day.
- B. If additional days are required, the requesting PRTF shall send a request for additional days and supporting documentation to the assigned MCO for a determination of the request.
- C. The MCO will apply their internal criteria for requesting additional days.
- D. If a service recipient has a private insurance, the PRTF must obtain a denial based on the psychiatric level of care in order to bill Medicaid as the payer of last resort

Documentation/Quality Assurance

- A. Provider Requirements
- B. Documentation
- C. Quality Assurance

Policy Name: Psychiatric Residential Treatment Facility TPL Cost Policy Number: TBD

Avoidance and Reserve Days

Commission: Behavioral Health Services

Applicability: Behavioral Health Services Children's Inpatient Program

Contact:

Policy Location:

Status/Date: DRAFT September 27, 2016

Date Established: 11/15/2016

Date Last Revised: N/A

Date Effective: 03/01/2017

Date Posted: TBD Number of Pages: 3

III. Definitions

A. Reserve Days: Days a resident is absent from a PRTF for more than 24 hours due to admission to a hospital for acute conditions, therapeutically indicated home visits with relatives and friends, or participation in any state-approved therapeutic or rehabilitative program.

Authority

Federal Authorities

42 C.F.R. 441.155 (b)(5)

State Authorities

K.S.A. 39-708c K.A.R. 30-10-21

Related Information

PUBLIC COMMENT PERIOD:

RELATED CONTENT:

Manuals:

• Psychiatric Residential Treatment Class II Facility Service Standards Manual https://www.kdads.ks.gov/docs/default-source/CSP/CSP-Documents/bhs-documents/licensing/mental-bealth/prtf_class_ii_service_standards_vol_4_010113.pdf?sfvrsn=6

ADDITIONAL LINKS: